

CLAIMS ONLY

Application Number

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments
	Indep	Depend	Indep	Depend	Indep	Depend	
1	1						51
2	1						52
3	1						53
4	1						54
5	1						55
6	1						56
7	1						57
8	1						58
9	1						59
10	1						60
11	1						61
12	1						62
13	1						63
14	1						64
15	1						65
16	1						66
17	1						67
18	1						68
19	1						69
20	1						70
21							71
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41							91
42							92
43							93
44							94
45							95
46							96
47							97
48							98
49							99
50							100
Total Indep	6						Total Indep
Total Depend	8						Total Depend
Total Claims	14						Total Claims